

Request for Waiver

Applicant Name: _____ Date of Request: _____

Address: _____

Farm Bill Program: (Check One)

☐ WHIP ☐ EQIP ☐ AMA ☐ CSP

I am requesting a waiver to begin the _____ practice. I have not
(Name of Practice)
started implementation yet, but I plan to proceed with construction or installation of the practice upon receipt of an approved NRCS design or specifications.

My reason(s) for this request are as follows:

I understand that this does not increase my chances for receiving a contract and that I am financially responsible for all expenses incurred on this practice. Should I qualify for a contract, receive and sign one, then and only then will I be allowed to submit any bills for this practice.

I understand that I will be ineligible to receive any payments if any of the following occurs:

- The contract is not approved
- The practice is not completed in a manner that meets NRCS standards and specifications.
- The requested practice is not included in the approved conservation plan for funding.

Participants _____ Date: _____
Signature: _____

NRCS District Conservationist - CONCURRENCE

Print Name

Signature

Date: _____